



AGENCY OF HUMAN SERVICES

DEPARTMENT OF DISABILITIES, AGING AND INDEPENDENT LIVING

Division of Licensing and Protection

HC 2 South, 280 State Drive

Waterbury, VT 05671-2060

<http://www.dail.vermont.gov>

Survey and Certification Voice/TTY (802) 241-0480

Survey and Certification Fax (802) 241-0343

Survey and Certification Reporting Line: (888) 700-5330

To Report Adult Abuse: (800) 564-1612

April 29, 2019

Mr. Willem Leenman, Manager
47 Main Street
Po Box 38, 706 Main Street
Castleton, VT 05735-0038

Dear Mr. Leenman:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **March 21, 2019**. Please post this document in a prominent place in your facility.

We may follow-up to verify that substantial compliance has been achieved and maintained. If we find that your facility has failed to achieve or maintain substantial compliance, remedies may be imposed.

Sincerely,

A handwritten signature in black ink, appearing to read "Pamela M. Cota".

Pamela M. Cota, RN
Licensing Chief

PRINTED: 04/02/2019
FORM APPROVED

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0502	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 03/21/2019
NAME OF PROVIDER OR SUPPLIER 47 MAIN STREET		STREET ADDRESS, CITY, STATE, ZIP CODE PO BOX 38, 706 MAIN STREET CASTLETON, VT 05735		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
T 001	Initial Comments An unannounced on-site re-licensure survey was conducted on 3/19/19 and completed by phone on 3/21/19 by the Division of Licensing and Protection to determine compliance with the Licensing & Operating Regulations of Therapeutic Community Residence (TCR). The following regulatory violations was identified:	T 001		
T 052 SS=E	V.5.9.b.1.2.3.4.5.6.7 Resident Care and Services 5.9 Staff Services 5.9.b. The residence must ensure that staff demonstrate competency in the skills and techniques they are expected to perform before providing any direct care to residents. There shall be at least twelve (12) hours of training each year for each staff person providing direct care to residents. The training must include, but is not limited to, the following: (1) Resident rights; (2) Fire safety and emergency evacuation; (3) Resident emergency response procedures, such as the Heimlich maneuver, accidents, police or ambulance contact and first aid; (4) Policies and procedures regarding mandatory reports of abuse, neglect and exploitation; (5) Respectful and effective interaction with residents; (6) Infection control measures, including but not limited to, hand washing, handling of linens, maintaining clean environments, blood borne	T 052	We will design a form that lists all the required educational topics that need to be addressed annually. Each employee will receive one of these forms to track that all mandatory topics will be addressed in any given year. Kathy Taylor RN, our consulting nurse, will check the progress for each employee on a monthly basis. She will also provide materials for self-study and conduct in-service training. This process will be in place no later than April 30, 2019 <i>T-052 - Accepted POC 4/25/19 J. McIntosh</i>	

Division of Licensing and Protection
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X8) DATE

STATE FORM

THDM11

Continuation sheet 1 of 3

PRINTED: 04/02/2019
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T 052	Continued From page 1 pathogens and universal precautions; and (7) General supervision and care of residents This REQUIREMENT is not met as evidenced by: Based on record review and staff interview, the TCR failed to demonstrate that 5 of 5 staff were provided and participated in the annual twelve hours of training as required by TCR regulation. Training topics must be specific to resident rights, fire safety and emergency evacuation; first aid; abuse, neglect and exploitation; respectful communication; infection control, and general care and supervision. Findings include: Per record review on 3/19/19, there was a lack of evidence that required training was provided on an annual basis to 5 applicable employees. The Manager/owner confirmed on the morning of 3/21/19 although staff had completed a number of trainings associated with the TCR and resident behavioral management, the required regulatory training had not been completed.	T 052		
T 187 SS-E	IX.9.11.c Physical Plant 9.11 Disaster and Emergency Preparedness 9.11.c Each residence shall have in effect, and available to staff and residents, written copies of a plan for the protection of all persons in the event of fire and for the evacuation of the building when necessary. All staff shall be instructed periodically and kept informed of their duties under the plan. Fire drills shall be conducted on at least a quarterly basis and shall rotate times of day among morning, afternoon, evening, and night. The date and time of each drill and the	T 187		

W: [Signature] 4/15/19

PRINTED: 04/02/2019
FORM APPROVED

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T 187	Continued From page 2 names of participating staff members shall be documented. This REQUIREMENT is not met as evidenced by: Based on staff interview and record review, the TCR failed to rotate times of day when conducting required fire drills. Findings include: Per review of the TCR fire drill records, there was a failure to conduct a fire drill during nighttime/overnight hours. This was confirmed by the TCR Manager/owner on the afternoon of 3/19/19.	T 187	We will add night time fire drills to the rotating times of drills, so that morning, afternoon, evening and night time drills will be conducted annually. Willem Leenman, Director, will monitor compliance and ensure that drills are recorded in our Fire Safety Record notebook. This process will be in place no later than April 30, 2019 <i>T-187 POC Accepted De. De. Intosh 4/28/19 Willem Leenman 4/15/19</i>	